

BUILDING PERMIT APPLICATION

Permit # _____ - _____

ADDRESS OF JOB

Subdivision _____ **Filing** _____ **Lot** _____ **Block** _____

Property Owner _____ Phone _____

Mailing Address _____ Email: _____

General Contractor _____ Phone _____

Electrical Contractor _____ Phone _____

Plumbing Contractor _____ Phone _____

Mechanical Contractor _____ Phone _____

Type of Improvement <input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Lawn Sprinkler <input type="checkbox"/> Replacement/Repair <input type="checkbox"/> Footing & Foundation <input type="checkbox"/> Fire Sprinkler <input type="checkbox"/> Setback & Use <input type="checkbox"/> Fence Other _____ <hr/> <hr/> <hr/> Sewage Disposal <input type="checkbox"/> Public/Private Name _____	Main Heat Source <input type="checkbox"/> Natural Gas <input type="checkbox"/> Electricity Type of Heat <input type="checkbox"/> Forced air <input type="checkbox"/> Electric Baseboard <input type="checkbox"/> Air Conditioning Off Street Parking <input type="checkbox"/> Enclosed <input type="checkbox"/> Outdoor Water Supply <input type="checkbox"/> Public/Private Name _____ LOT SIZE _____ s.f.	RESIDENTIAL USE <input type="checkbox"/> * Single Family Number of floors _____ <input type="checkbox"/> * Multi Family Number of units _____ <input type="checkbox"/> * Hotel/Motel/Apts Number of units _____ <input type="checkbox"/> * Basement Unfinished _____ Partial finish _____ Full finish _____ <input type="checkbox"/> * Crawl space <input type="checkbox"/> * Slab <input type="checkbox"/> * Patio _____ s.f. <input type="checkbox"/> * Deck _____ s.f.	RESIDENTIAL USE Garage <input type="checkbox"/> 1 car <input type="checkbox"/> 2 car <input type="checkbox"/> 3 car <input type="checkbox"/> Other/tandem <input type="checkbox"/> Attached <input type="checkbox"/> Detached <input type="checkbox"/> Car port Fireplace <input type="checkbox"/> Masonry <input type="checkbox"/> Zero clearance <input type="checkbox"/> Gas log <input type="checkbox"/> Wood stove *Number of bedrooms _____ *Number of bathrooms _____ Full _____ 3/4 _____ 1/2 _____
	_____ _____ _____		

DESCRIPTION OF WORK TO BE DONE: _____

<p>OFFICE USE ONLY</p> <p>Use _____ Occupancy _____ Construction Type _____</p> <p>FEES</p> <p>Valuation</p> <p>Building</p> <p>Plan Review Submittal Fee</p> <p>Plan Review</p> <p>Electrical</p> <p>Paving</p> <p>Water Upgrade</p> <p>Water/Sewer Reimbursement</p> <p>Raw Water</p> <p>Water Meter</p> <p>TC Metro District Fee</p> <p>Water Tap</p> <p>Sewer Tap</p> <p>CR 13 Improvements – CB 3&4</p> <p>CR 13 Administrative Fee</p> <p>Sewer Impact Fee – CB 3&4</p> <p>Administrative Fee</p> <p>Sewer Inspection</p> <p>Park Fee</p> <p>Use Tax</p> <p>Larimer County Use Tax</p> <p>Open Space Fee</p> <p>Library Facilities Fee</p> <p>Public Facilities Fee</p> <p>Police Facilities Fee</p> <p>Transportation Fee</p> <p>Traffic Signal Fee</p> <p>Clearview II Fence Development</p> <p>Other: _____</p> <p>TOTAL FEES</p> <p>School Impact Fee</p>	<p>Residential Stock Plan Name: _____</p> <p>Value of Work: \$ _____ Total</p> <p>Material \$ _____</p> <p>Labor \$ _____</p> <hr/> <p>The applicant or agent(s) and employees shall comply with all the rules, regulations and requirements of the Johnstown Municipal Code governing location, construction and erection of the above-proposed work for which this permit is granted. The Town of Johnstown or its agents are authorized to order the immediate cessation of construction at any time a violation of the Town Municipal Code appears to have occurred. Violation of any of the Johnstown Municipal Code requirements may result in the revocation of this permit.</p> <p>Buildings MUST conform with the plans, as approved by the Town. Any change of plans or layout must be approved prior to the changes being made. Any change in the use or occupancy of the building or structure must be approved.</p> <p>The applicant is required to call for inspections at various stages of the construction. The applicant shall give the building inspector not less than 24 hours notice to perform the inspections.</p> <p>In the event construction is not commenced within 90 days of issuance of this permit, the permit is expired. If the work described in any building permit has not been substantially completed within two (2) years of the date of issuance, the permit is expired. Permits are not transferrable.</p> <hr/> <p>*SIGNATURE OF APPLICANT _____ DATE _____</p> <p>PLANNING DEPT APPROVAL: _____</p> <p>BUILDING DEPT APPROVAL: _____</p> <hr/> <p>**Separate check made out to the appropriate school district Weld County District RE-5J or Thompson District R2-J</p>
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DATE ISSUED: _____ **Ck #** _____ **By:** _____

